

In the Claims:

Please amend claim 10. Please cancel claims 1, 2, and 12-19. Please add new claims 20-40. The claims and their status are shown below.

1. (Canceled)
2. (Canceled)
3. (Original) A method of treating an individual with prostate cancer or at risk of developing prostate cancer, comprising the steps of:
 - identifying an individual with prostate cancer or at risk of developing prostate cancer;
 - administering a dose of perillyl alcohol (POH) or a derivative thereof to said individual effective to inhibit the transactivating ability of an androgen receptor; and
 - monitoring the transactivating ability of said androgen receptor in said individual, wherein inhibiting the transactivating ability of said androgen receptor inhibits the proliferation of prostate cancer cells, thereby treating said individual.
4. (Original) The method of claim 3, wherein said administration is selected from the group consisting of oral, transdermal, intravenous, intraperitoneal, and implanted.
5. (Original) The method of claim 3, wherein said effective dose is from about 100 mg/kg to about 300 mg/kg.
6. (Original) The method of claim 3, wherein said individual is a human.
7. (Original) A method of reducing the risk of recurrence of prostate cancer in an individual, wherein said individual previously had been treated for prostate cancer, comprising the step of:
 - administering a dose of perillyl alcohol (POH) or a derivative thereof to said individual effective to inhibit the transactivating ability of an androgen receptor,
 - wherein inhibiting the transactivating ability of said androgen receptor inhibits the proliferation of prostate cancer cells, thereby reducing the risk of recurrence of prostate cancer in said individual.
8. (Original) The method of claim 7, further comprising the step of:
 - monitoring the transactivating ability of said androgen receptor in said individual.

9. (Currently Amended) The method of claim 7, wherein said previous treatment for prostate cancer in said individual comprised a radical prostatectomy ~~prostatectomy~~.

10. (Currently Amended) A method of treating an individual with benign prostatic hyperplasia (BPH) or at risk of developing BPH, comprising the steps of:

identifying an individual with BPH or at risk of developing BPH; and
administering a dose of perillyl alcohol (POH) or a derivative thereof to said individual effective to inhibit the transactivating ability of an androgen receptor,
thereby treating ~~said BPH in~~ said individual.

11. (Original) The method of claim 10, further comprising the step of:

monitoring the transactivating ability of said androgen receptor in said individual.

12-19. (Canceled)

20. (New) A method of treating an individual with prostate cancer or at risk of developing prostate cancer, comprising the steps of:

identifying an individual with prostate cancer or at risk of developing prostate cancer;

administering a dose of POH or a derivative thereof to said individual effective to inhibit the transactivating ability of an androgen receptor; and

monitoring said individual for a dose-dependent reduction in prostate-specific antigen (PSA) levels, wherein said dose-dependent reduction in PSA correlates with a dose-dependent inhibition of said transactivating ability of said androgen receptor.

21. (New) The method of claim 20, further comprising:

monitoring human glandular kallikrein (hK2) levels in said individual, wherein a reduction in hK2 correlates with an inhibition of said transactivating ability of said androgen receptor.

22. (New) The method of claim 20, further comprising:

adjusting, if necessary, said dose of POH or a derivative thereof to achieve or maintain said dose-dependent reduction in PSA.

23. (New) A method of treating an individual with prostate cancer or at risk of developing prostate cancer, comprising the steps of:

identifying an individual with prostate cancer or at risk of developing prostate cancer;

administering a dose of POH or a derivative thereof to said individual effective to inhibit the transactivating ability of an androgen receptor; and

monitoring human glandular kallikrein (hK2) levels in said individual, wherein a reduction in hK2 correlates with an inhibition of said transactivating ability of said androgen receptor.

24. (New) The method of claim 23, further comprising:

adjusting, if necessary, said dose of POH or a derivative thereof to achieve or maintain said reduction in hK2.

25. (New) The method of claim 7, further comprising:

monitoring said individual for a dose-dependent reduction in prostate-specific antigen (PSA) levels, wherein said dose-dependent reduction in PSA correlates with a dose-dependent inhibition of said transactivating ability of said androgen receptor.

26. (New) The method of claim 25, further comprising

monitoring human glandular kallikrein (hK2) levels in said individual, wherein a reduction in hK2 correlates with an inhibition of said transactivating ability of said androgen receptor.

27. (New) The method of claim 25, further comprising:

adjusting, if necessary, said dose of POH or a derivative thereof to achieve or maintain said dose-dependent reduction in PSA.

28. (New) The method of claim 7, further comprising:

monitoring human glandular kallikrein (hK2) levels in said individual, wherein a reduction in hK2 correlates with an inhibition of said transactivating ability of said androgen receptor.

29. (New) The method of claim 28, further comprising:

adjusting, if necessary, said dose of POH or a derivative thereof to achieve or maintain said reduction in hK2.

30. (New) The method of claim 10, further comprising:

monitoring said individual for a dose-dependent reduction in prostate-specific antigen (PSA) levels, wherein said dose-dependent reduction in PSA correlates with a dose-dependent inhibition of said transactivating ability of said androgen receptor.

31. (New) The method of claim 30, further comprising:

monitoring human glandular kallikrein (hK2) levels in said individual, wherein a reduction in hK2 correlates with an inhibition of said transactivating ability of said androgen receptor.

32. (New) The method of claim 30, further comprising:

adjusting, if necessary, said dose of POH or a derivative thereof to achieve or maintain said dose-dependent reduction in PSA.

33. (New) The method of claim 10, further comprising:

monitoring human glandular kallikrein (hK2) levels in said individual, wherein a reduction in hK2 correlates with an inhibition of said transactivating ability of said androgen receptor.

34. (New) The method of claim 33, further comprising:

adjusting, if necessary, said dose of POH or a derivative thereof to achieve or maintain said reduction in hK2.

35. (New) A method of treating an individual with prostate cancer or at risk of developing prostate cancer, comprising the steps of:

identifying an individual with prostate cancer or at risk of developing prostate cancer;

administering a dose of POH or a derivative thereof to said individual effective to inhibit the proliferation of prostate cancer cells; and

monitoring said individual for a dose-dependent reduction in prostate-specific antigen (PSA) levels.

36. (New) A method of treating an individual with prostate cancer or at risk of developing prostate cancer, comprising the steps of:

identifying an individual with prostate cancer or at risk of developing prostate cancer;

administering a dose of POH or a derivative thereof to said individual effective to inhibit the proliferation of prostate cancer cells; and

monitoring human glandular kallikrein (hK2) levels in said individual.

37. (New) A method of reducing the risk of recurrence of prostate cancer in an individual, wherein said individual previously had been treated for prostate cancer, comprising the step of:

administering a dose of POH or a derivative thereof to said individual effective to inhibit the proliferation of prostate cancer cells; and

monitoring said individual for a dose-dependent reduction in prostate-specific antigen (PSA) levels.

38. (New) A method of reducing the risk of recurrence of prostate cancer in an individual, wherein said individual previously had been treated for prostate cancer, comprising the step of:

administering a dose of POH or a derivative thereof to said individual effective to inhibit the proliferation of prostate cancer cells; and

monitoring human glandular kallikrein (hK2) levels in said individual.

39. (New) A method of treating an individual with benign prostatic hyperplasia (BPH) or at risk of developing BPH, comprising the steps of:

identifying an individual with BPH or at risk of developing BPH;

administering a dose of POH or a derivative thereof to said individual effective to inhibit the proliferation of BPH cells; and

monitoring said individual for a dose-dependent reduction in prostate-specific antigen (PSA) levels.

40. (New) A method of treating an individual with benign prostatic hyperplasia (BPH) or at risk of developing BPH, comprising the steps of:

identifying an individual with BPH or at risk of developing BPH; and

administering a dose of POH or a derivative thereof to said individual effective to inhibit the proliferation of BPH cells; and

monitoring human glandular kallikrein (hK2) levels in said individual.